

General Assembly

Raised Bill No. 1026

January Session, 2013

LCO No. 3721



Referred to Committee on HUMAN SERVICES

Introduced by: (HS)

AN ACT CONCERNING AN ADEQUATE PROVIDER NETWORK TO ENSURE POSITIVE HEALTH OUTCOMES FOR LOW INCOME RESIDENTS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. (Effective from passage) (a) There is established a
- 2 commission to study obstacles to achieving an adequate health care
- 3 provider network for Medicaid recipients and to recommend strategies
- 4 to improve (1) access to such providers, and (2) health outcomes for
- 5 such recipients across racial and ethnic lines.
- 6 (b) The commission shall study obstacles to achieving an adequate
- 7 provider network which include, but are not limited to: (1)
- 8 Administrative burdens, (2) provider education concerning provision
- 9 of care to Medicaid recipients, and (3) Medicaid rates of
- 10 reimbursement to such providers.
- 11 (c) The commission shall identify strategies to (1) improve access to
- 12 Medicaid providers by Medicaid recipients, (2) improve health
- 13 outcomes of all Medicaid recipients, (3) reduce spending rates,

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- 14 particularly for the provision of care to Medicaid recipients with the
- 15 costliest health needs, and (4) reduce racial and ethnic disparities in
- 16 health outcomes.
- 17 (d) The commission shall consist of the following members:
- 18 (1) One advocate for recipients of Medicaid appointed by the 19 speaker of the House of Representatives;
- 20 (2) One advocate for persons with psychiatric disabilities appointed 21 by the president pro tempore of the Senate;
- 22 (3) One physician who currently does not accept Medicaid 23 recipients appointed by the majority leader of the House of 24 Representatives:
- 24 Representatives;

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- 25 (4) One provider of home or hospice care for Medicaid recipients 26 appointed by the majority leader of the Senate;
- 27 (5) One representative of the state nursing home industry appointed 28 by the minority leader of the House of Representatives;
- 29 (6) One representative of the Connecticut Hospital Association 30 appointed by the minority leader of the Senate;
- 31 (7) The chairpersons and ranking members of the joint standing 32 committees of the General Assembly having cognizance of matters 33 relating to human services and public health; and
 - (8) One primary care physician who serves Medicaid recipients, one representative of a federally qualified health center affiliated with the Community Health Center Association of Connecticut and one representative of community providers of behavioral care for Medicaid recipients, each appointed by the Governor.
- (e) All appointments to the commission shall be made not later than thirty days after the effective date of this section. Any vacancy shall be

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41 filled by the appointing authority.

- (f) The speaker of the House of Representatives and the president pro tempore of the Senate shall select the chairpersons of the commission from among the members of the commission. Such chairpersons shall schedule the first meeting of the commission, which shall be held not later than sixty days after the effective date of this section.
- 48 (g) The administrative staff of the Office of Health Care Reform and 49 Innovation shall serve as administrative staff of the commission.
 - (h) In order to carry out its duties under this section, the commission may raise funds, apply for and accept any public or private grant money, accept contributions, enter into contracts and, within available resources, hire any necessary consultants. The commission shall seek any funding or support available pursuant to the Affordable Care Act, P.L. 111-148, as amended from time to time, and may contract with a health care consultant to provide a comprehensive review of successful efforts nationwide to expand provider networks for Medicaid recipients and provide related cost estimates.
 - (i) Not later than January 1, 2014, the commission shall submit a report on its findings and recommendations, with a corresponding fiscal analysis, to the joint standing committees of the General Assembly having cognizance of matters relating to human services and public health, in accordance with the provisions of section 11-4a of the general statutes. The commission shall terminate on the date that it submits such report or January 1, 2014, whichever is later.

This act shall take effect as follows and shall amend the following sections:		
Section 1	from passage	New section

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Statement of Purpose:

To improve health outcomes and ensure Medicaid recipients have timely access to an adequate network of health care providers in time for the expansion of Medicaid under the Affordable Care Act.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

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